## STATE OF MISSOURI

DEPARTMENT OF NATURAL RESOURCES

AIR POLLUTION CONTROL PROGRAM

1101 RIVERSIDE DRIVE, P.O. BOX 176

JEFFERSON CITY, MISSOURI 65102-0176

## **EMISSIONS INVENTORY QUESTIONNAIRE (EIQ)** FORM 3.0 EMISSIONS FEE CALCULATION

FACILITY NAME					FIPS COUNTY NO.		PLANT NO.		YEAR OF DATA
[1] POINT NO.	Use one row to list the emissions from one emission point. Sum the emissions in the page total box at the bottom of the column. If more than one page is needed, use the first row of the duplicated page to list the page totals from this page. Express emission figures in tons per year and round to two [2] decimal places.  AIR POLLUTANT								
SCC									
	PM10	SOx	NOx	VOC	СО	LEAD	HAPs	PM2.5	NH3
	4								
	+		+				_	+	
	-								
								+	
	1								
	1								
	4								
PAGE TOTALS									
	NO	TE: FILL OF	IT THE LOWE	R PORTION (	OF THIS FO	RM ONF TI	ME ONLY		
[2] ACTUAL EMISS								ission figu	res below.)
[_] / (0 / 0 / (	PM10	SOx	NOx	VOC	CO	LEAD	HAPs	PM2.5	NH3
						Plant Emis	sions section of	Form 1.0.	
[3] CHARGEABLE	EMISSIONS	(Maximum 4	,000 Tons/Yr (	Cap per Pollui	tant)				
					NO FEES			NO FEES	S NO FEES
					FOR CO			FOR PM2	
[4] SUM OF CHAR									
(Maximum 12,00	00 tons per ye	ar cap; ROUI	ND TO NEARE	ST WHOLE IC	JN.)				TONS/YR
[5] TOTAL ANNUA	L EMISSIONS	FEE	0	NE TON MINI	и∪м   \$				
	(See Instru	ictions for fee	schedule)						
[6] ANNUAL EMISS	IONS FEE RE	MITTED TO T	HE CITY OF K	ANSAS CITY (	OR ST LOUI	S COUNTY	LOCAL AIR AG	ENCY (IF A	PPLICABLE)
CHECK NUMBER			CHECK DATE				NT REMITTED IN CAL	ENDAR YEAR OF	F RECORD
						\$			
[7] ANNUAL EMISS	IONS FEE RE	MITTED TO T		OX 5 MINUS BO	OX 6)				
CHECK NUMBER			CHECK DATE				K AMOUNT		
TOT be already as a broad	l- f (l				in Dellertien	\$			
[8] Include a check							ogram.		
Mail the check	ioi uie emissi	ons iee to tr	ie State Alf A	gency listed a	it the top of	uns iorm.			
[9] Send the comp	leted questio	nnaire and a	any supportin	g documenta	tion to the a	agency list	ed at the top o	f Form 1.0.	
Facilities within lo	cal air progra	am jurisdicti	on only need	l to include co	onies of Fo	rm 1.0 3.0	and 4.0 along	with the e	missions fee
check to the Jeffe			on only need	5	- Pico oi i o	, 5.0,	and no diong		
MO 780-1509 (8-05)			DUPL	ICATE THIS FORM A	S NEEDED.				